

CERTIFICATE OF MAILING

I hereby certify that the below listed items are being deposited with the U.S. Postal Service as first class mail in an envelope addressed to:

**Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450**

on August 23, 2005.

Anne Antonoff
Anne Antonoff

In Re Application of:

McLampy

Serial No.: 09/844,204

Filed: April 27, 2001

Confirmation No.: 1439

Group Art Unit: 2666

Examiner: TON, Dang. T.

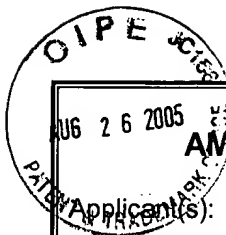
Docket No.: 050115-1010

**For: SYSTEM AND METHOD FOR ASSISTING IN CONTROLLING REAL-TIME
TRANSPORT PROTOCOL FLOW THROUGH MULTIPLE NETWORKS**

The following is a list of documents enclosed:

Return Postcard;
Amendment Transmittal
Terminal Disclaimers(2)
Check in the amount of \$260.00 for Terminal Disclaimers
Amendment and Response to Office Action

Further, the Commissioner is authorized to charge Deposit Account No. 20-0778 for any additional fees required. The Commissioner is requested to credit any excess fee paid to Deposit Account No. 20-0778.



1FW 2666 ✓

AMENDMENT TRANSMITTAL LETTER (SMALL)

Docket No.

50115-1010

Applicant(s): **MeLampy**

Serial No.
09/844,204

Filing Date
April 27, 2001

Examiner
TON, Dang T.

Confirmation No.
1439

Group Art Unit
2666

Inventors: **System and Method for Assisting in Controlling Real-Time Transport Protocol Flow Through Multiple Networks**

**Commissioner for Patents
Mail Stop Amendment
P.O. Box 1450
Alexandria VA 22313-1450**

Transmitted herewith is Amendment and Response to Office Action in the above-identified application.

The fee has been calculated and is transmitted as shown below

CLAIMS AS AMENDED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	62 -	62 =	0	X \$25.00	\$0
INDEP. CLAIMS	3 -	3 =	0	X \$100.00	\$0
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$180.00
EXTENSION FEE	1 ST MONTH <input type="checkbox"/> \$60.00	2 ND MONTH <input type="checkbox"/> \$225.00	3 RD MONTH <input type="checkbox"/> \$510.00	4 TH MONTH <input type="checkbox"/> \$795.00	\$0
Other Fees: Terminal Disclaimers (2)					\$260.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$260.00

- ☐ No additional fee is required.
- ☐ Please charge Deposit Account No. _____ in the amount of _____. A duplicate copy of this page is enclosed.
- ☒ A check in the amount of \$260.00 to cover the filing fee of the RCE & Supplemental IDS are enclosed.
- ☐ A Credit Card Payment Form PTO-2038 is attached in the amount of \$_____.
- ☒ The Director is hereby authorized to charge any deficiencies of the above fees or credit any overpayment to Deposit Account No. 20-0778.

Karen G. Hazzah
Karen G. Hazzah, Reg. No. 48,472

Aug. 22, 2005
Date